Essential Needs and Current Gaps: Regulatory Support

Dr. David Wood

Coordinator, Quality Safety and Standards, Immunizations Vaccines and Biologicals World Health Organization (WHO)



Regulatory functions depending on vaccine source

	_	Vaccine source	
Regulatory functions		UN agency	Direct Production Procurement
Regulation System			
Licensing			
AEFI monitoring			
Lot release		Functions	
Access to laboratory		assured by NRA of	
Regulatory inspections			Fuctions assured by NRA of
Authorization of clinical trials			

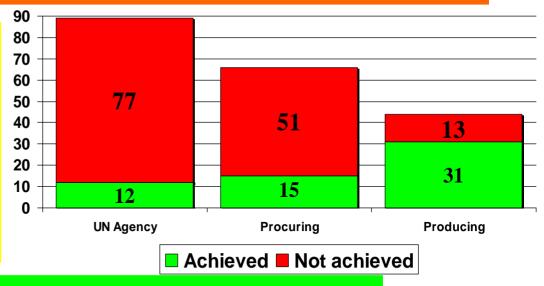
WHO and Member States vision and stakeholder expectations

100% of vaccines used in national immunization programmes are of assured quality by 2013 (Medium Term Strategic Plan indicator)

Partners

(UNICEF, manufacturers, GAVI, BMGF, PATH, etc)

 More and faster licensure and prequalification of vaccines

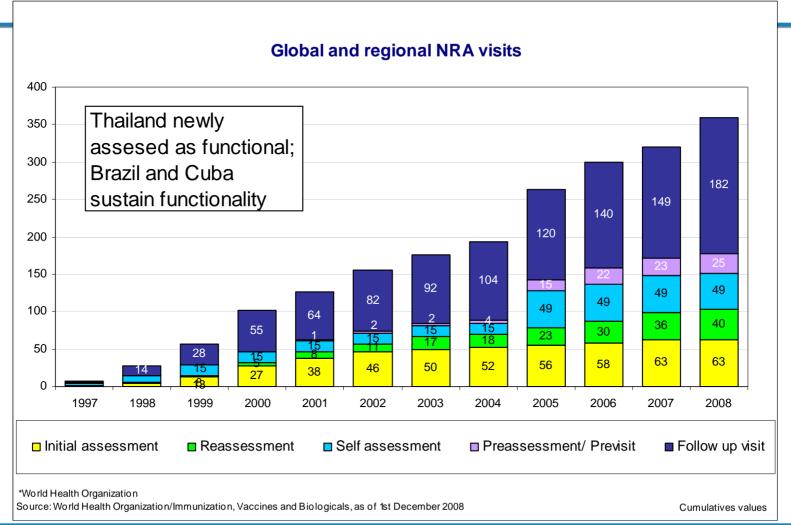


Countries

crisis management for vaccine safety events



NRA assessment activities – 2008 update



359 WHO* NRA VISITS CONDUCTED: 1997



Process to strengthen NRAs The five step capacity building programme:

Benchmarking

NRA assessment

Planning to address gaps (Institutional Development Plan)

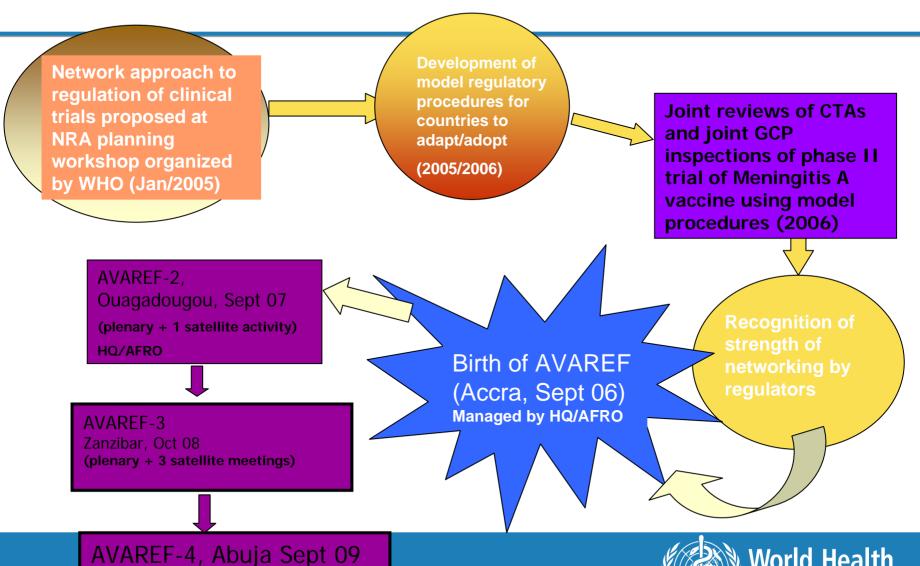
Implementation of plan, including technical inputs (GLO)

Planning to address gaps NRA Network of regulatory experts Training NRA Institutional needs Assessment development using joint Follow up plan to assessment visits address gaps tools **Technical** (Drua & vaccine support 15-24 months (6-8 months in needs much GTN placement 5 days assessment improvement) within 1-3 months

Monitoring and evaluation



Regulatory networking - another way to develop capacity example of AVAREF



AVAREF achievements



An historical moment · For the 1st time in Africa. regulators and ethics committee members from Burkina Faso, The Gambia, Ghana, Ethiopia and Mali conducted an inspection of Good Clinical Practice (GCP) inspection of phase ii observerblind, randomized, active controlled clinical trial of meningococcal A conjugate vaccine at the Centre for Vaccine Development (CVD), Bamako, Mali; January, 2007



POST-MARKETING SURVEILLANCE OF PANDEMIC INFLUENZA A (H1N1) VACCINES



Support being provided by WHO to countries receiving donated pandemic vaccine

- Provision of latest information on vaccine safety profile
- Definition of minimum, essential data required for a situation analysis
- Advice on format and timelines for reporting and duration of followup
- Provision of reporting tool, and training in it's use, by a WHO
 Collaborating Centre (the Uppsala Monitoring Centre) to facilitate
 accumulation of data locally, nationally, and to the WHO
- Access to technical advice as needed



Conclusions



Expansion of functional regulatory base for vaccines - lessons learned

- Influenza regulatory oversight should be embedded within an overall regulatory framework
- Strengthening regulatory agencies requires a long-term strategy and strong political commitment
- There are several ways of achieving improved regulatory capacity; whatever mechanism(s) is used it/they should be linked to an institutional development plan
- Countries have failed to develop sustainable vaccine production capacity if they have not invested in strengthening regulatory oversight in parallel with improved manufacturing facilities



Conclusions

 Sustainable influenza vaccine production capacity requires a strong linkage of plans to develop manufacturing plant and know-how together with plans to develop independent regulatory capacity and knowhow

